



PTO-85/21 (08-00)

## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

	Application Number <b>09/781,492</b> Filing Date <b>February 13, 2001</b> First Named Inventor <b>Magdy Abadir</b> Group Art Unit <b>2825</b> Examiner Name <b>Annette M. Thompson</b> Total Number of Pages in this Submission <b></b> Attorney Docket Number <b>SC11403TS</b>
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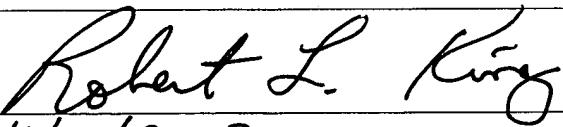
**ENCLOSURES**

(check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply Under C.F.R. § 1.116 <input checked="" type="checkbox"/> After Final <input checked="" type="checkbox"/> Affidavits/Declaration(s) Under 37 C.F.R. § 1.132 <input type="checkbox"/> Extension of time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Documents <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts Under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-Related papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CDs	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter with appropriate copies <input type="checkbox"/> Return Postcard <input type="checkbox"/> Other Enclosure(s) (please identify below) <ul style="list-style-type: none"> <li><input type="checkbox"/> Associate Power of Attorney</li> <li><input type="checkbox"/> RCE</li> <li><input type="checkbox"/> Copy of Notice to File Missing Parts</li> <li><input type="checkbox"/> Transmittal of Formal Drawings</li> <li><input type="checkbox"/> Cited References *</li> </ul>
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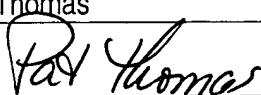
Remarks

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm or Individual	Robert L. King	Registration No.	30,185
Signature			
Date	11/7/2003		

**CERTIFICATE OF MAILING**

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